



### Introduction

**The United States faces an oral health crisis.** Despite advancements in oral health, dental caries have been spotlighted as the most prevalent chronic disease among children for the past 20 years. Dental caries and periodontal disease also two of the most prevalent chronic diseases among adults. Not only does the prevalence of dental disease make it important to care about, but there are severe physical, social, and economic consequences of poor oral health. Socioeconomic disparities also exist. Vulnerable populations face multiple barriers to accessing dental care like access to transportation, insurance and a provider who accepts it, and a provider who speaks the same language.

Dental care management workforce models focus on expanding access to dental care through care coordination, as shown through the logic model below. This involves connecting people with a dental home or an “ongoing relationship between a dentist and a patient, inclusive of all aspects of oral health care delivered in a comprehensive, continuously accessible, coordinated, and family-centered way”, as well as the things they need to access a dental home like reliable transportation, comprehensive insurance, etc. The Community Dental Health Coordinator (CDHC) model is a type of dental care management workforce model. The Catawba Valley Community College (CVCC) CDHC education program in Hickory, NC was started in 2018 and no prior evaluation has been completed.

### Research Questions

1. How is the CVCC CDHC program structured?
2. Is the CVCC CDHC program meeting its objectives, including employment of CDHCs?
3. What are the strengths, weaknesses, opportunities and threats related to the implementation and long-term success of the CVCC CDHC program? (SWOT analysis)

### Methodology and Methods

**Formative process evaluation** occurs early on before a program is fully implemented. Process evaluation is a type of evaluation within formative evaluation that examines how well program activities have been implemented and whether they have been implemented as intended. Mixed approach methods of implementation evaluation were used to build the efficacy of another.

#### 1. Construct a detailed program logic model

*Study Participants:* Non-random sample of 4 program instructors + 1 key partner

*Data Collection Logistics:* Common Zoom meeting

#### 2. Key informant interviews

*Study Participants:* Non-random sample of 4 program instructors + 1 key partner

*Data Collection Logistics:* Individual Zoom meetings

*Data Instrument:* Interview script with 10 questions

*Data Analysis:* Descriptive codes to identify themes and differences in perceptions

#### 3. Survey of program graduates

*Study Participants:* Entire population of 34 graduates from the first and second cohorts

*Data Collection Logistics:* Email survey

*Data Instrument:* Survey questionnaire with 9 questions

*Data Analysis:* For nominal questions, percentages, means, and variances; For qualitative questions, descriptive codes



### Findings and Conclusion

#### 1. How is the CVCC CDHC program structured?

- a. Program structure involves candidate recruitment, education during the program, employment after the program, anticipated outcomes, and connections with external stakeholders and partners
- b. **58.8%** of graduates are finding out about the program through friends or colleagues
- c. **66.7%** of graduates are employed as a dental hygienist

#### 2. Is the CVCC CDHC program meeting its objectives, including employment of CDHCs?

- a. Overall the program is meeting its objectives; strengthening students ability to meet 10 learning outcomes + equipping students to use 7 skills in the workplace
- b. All graduates are being employed as oral health care workforce personnel, but **33.3%** of graduates who are seeking employment as a CDHC are not finding employment

#### 3. What are the strengths, weaknesses, opportunities, and threats related to the implementation and long-term success of the CVCC CDHC program?

- a. Lack of program objectives specific to the CVCC CDHC program
- b. Lack of an advisory board
- c. Not highly engaged with stakeholders
- d. Job market conditions and finances impact student recruitment and enrollment, as well as graduate employment

*Overall, the program is meeting its objectives although there are some areas for improvement. Additionally, opportunities to improve program structure exist especially regarding external connections.*

#### References

- American Dental Association
- Catawba Valley Community College
- US Department of Health and Human Services
- Centers for Disease Control
- Colgate Professional
- World Health Organization

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